

DBHDID
EMERGENCY SERVICES INSTRUCTIONS & OBJECTIVES

FY 2020

The Kentucky Department for Behavioral Health, Developmental and Intellectual Disabilities contracts with the Community Mental Health Centers to serve as the behavioral health safety net for Kentucky's citizens. CMHCs must provide a timely, effective response to all individuals who seek services during a behavioral health crisis/emergency. The CMHC's system shall serve individuals with mental health disorders, substance use disorders, intellectual and other developmental disabilities and co-occurring disorders. As the regional public safety net, the CMHC shall adhere to the following guiding principles:

Kentucky Emergency Services Guiding Principles

- ◆ **Embraces Recovery:** In a recovery-oriented approach to crisis care, the risks of harm to self or others are recognized; however, crises are viewed as challenges that present opportunities for growth and empowerment.
- ◆ **Significant Role for Peers:** Recovery-oriented crisis carefully engages the experiences, capabilities, and compassion of people who have experienced mental health crises.
- ◆ **Trauma-Informed Care:** Environments and treatment approaches that are safe and calm can facilitate healing.
- ◆ **Zero Suicide/Suicide Safer Care:** Comprehensive crisis services is foundational to suicide prevention. Comprehensive crisis intervention systems must include all of the core elements and core principles and practices of Zero Suicide/Suicide Safer Care.
- ◆ **Safety and Security for Clients and Staff:** Ensuring safety and the perception of safety for both clients and staff is essential for effective crisis care.
- ◆ **Respect:** Emergency services programs and staff shall:
 - Respect the needs and wishes of each person and/or family experiencing a behavioral health crisis; and
 - Value and protect the rights, privacy, and confidentiality of each person in crisis, unless the person presents an imminent risk and confidentiality would compromise the required intervention; and
 - Consider the strengths and resources of the person in crisis, the family, and the community; and
 - Collaborate with others involved with the person in crisis, whenever appropriate and possible.
- ◆ **Comprehensive Array:** Each CMHC shall design an emergency service system that is comprehensive in order to meet regional, client and family needs in emergency situations.
- ◆ **Accessibility:** The CMHC is responsible for providing behavioral health crisis responses to all individuals who seek services when experiencing a behavioral health or intellectual and other developmental disabilities crisis, regardless of age, diagnosis, payor source, ability to pay, priority population group or agency of origin.
- ◆ **Timeliness:** Quick response times are a critical feature of an effective behavioral health emergency system.
- ◆ **Inclusion:** Every person has the right to receive a timely, effective emergency response from their CMHC.
- ◆ **Least Restrictive Setting:** Emergency services preserve community placement whenever possible and prevent institutionalization, hospitalization or increased levels of care. Services preserve natural supports of the individual experiencing the emergency to the greatest extent possible.
- ◆ **Accountability:** The emergency service system is accountable to individuals, their caregivers, families, communities and funding sources.
- ◆ **Collaboration:** Program design and delivery should be developed through a collaborative process that includes all pertinent stakeholders, including law enforcement, private and public hospitals, consumers, youth and family members.
- ◆ **Data Informed:** Decision making at the individual and systems level is guided by data.

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- ◆ **Evidenced Based Practice:** Emergency services responses need to be delivered in a holistic manner using evidenced based and best practices.
- ◆ **Cultural Competence:** Emergency services are provided by staff who are culturally and linguistically competent.
- ◆ **Community Awareness:** The procedure for accessing emergency behavioral health services should be common knowledge in the community.

New for FY 2020

Form 132

- Questions related to telehealth, safe care transitions, integrated care, suicide prevention and care, mobile crisis services, and workforce challenges.

Form 113D

- Definition of Children's Diversion from the Justice System Program included.
- Language changes to Children's Diversion from the Justice System Program to reflect definition.
- For Emergency Psychiatric Services: Number of admissions to the 23-hour holding bed unit and the state hospital.

Instructions

These guidelines are offered to assist you in completing both the plan and budget and periodic reporting requirements. Please share them with appropriate staff.

Centers are required to report all client related services in the client and event data sets. The following information is provided to assist with some specific data set reporting and also to detail the information to be reported manually for those services that cannot be coded in the data set.

As indicated on the Notice of Available Regional Funding (NARF), Centers receive restricted behavioral health funds for emergency services for both adults and children. Please indicate the planned spending on the MH Financial Planning and Implementation Report (Form 117) for each project listed. Also, complete the following applicable forms during the indicated period – during Plan and Budget, quarterly or semi-annually.

Due with Plan and Budget	<ul style="list-style-type: none">• Form 101 – Jail Triage PBFR (Bluegrass only)• Form 102 – Jail Triage Project Report Form (Bluegrass only)• Form 113D – Emergency Services Planning & Implementation Report• Form 117 – MH Financial Planning & Implementation Report• Form 132 – Emergency Services Application
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Form 113D - Emergency Services Planning & Implementation Report must be submitted during Plan and Budget AND on a semi-annual basis for those projects that cannot be entered into the Event Data Set.

Due Quarterly	<ul style="list-style-type: none">• Form 101 – Jail Triage PBFR (Bluegrass only)• Form 102 – Jail Triage Project Report Form (Bluegrass only)• Form 117 – MH Financial Planning & Implementation Report
Due Semi-Annually	<ul style="list-style-type: none">• Form 113D – Emergency Services Planning & Implementation Report

Event Data Set Reporting

Service Code 138: Residential Crisis Stabilization – Adult (Behavioral Health)

Service Code 139: Residential Crisis Stabilization - Child and Adolescent (Behavioral Health)

Unit of Service: per Diem

Definition:

Residential Crisis Stabilization services are provided in Crisis Stabilization Units. Crisis Stabilization Units are community-based, residential programs that offer an array of services including screening, assessment, treatment planning, individual, group, and family therapy, and peer support in order to stabilize a crisis and divert the individual from a higher level of care. It is not part of a hospital. They are used when individuals in a behavioral health emergency cannot be safely accommodated within the community, are not in need of hospitalization but need overnight care. The purpose is to stabilize the individual, provide treatment for acute withdrawal, when appropriate, and re-integrate them back into the community, or other appropriate treatment setting, in a timely fashion. These units provide a non-hospital residential setting and services 24 hours per day, 7 days per week, 365 days a year. The estimated length of stay for children is 3 to 5 days. The estimated length of stay for adults is 7 to 10 days. Services shall be provided in accordance with applicable Kentucky Statute and Regulations.

Regions providing overnight crisis stabilization in alternative settings (e.g., apartments, family care homes, emergency respite support) should also use this code.

Client Day: A client day shall begin at midnight and end 24 hours later. A part-day of admission shall count as a full day.

Service Code 176: Mobile Crisis (Behavioral Health/Intellectual Disabilities)

Unit of Service: 15 Minutes

This code should be used for mobile for both adults and children.

Mobile Crisis Services are designed to provide community-based interventions and supports for those experiencing a mental health or behavioral health crisis. The intent is to provide crisis services at the client's

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location rather than requiring the client to leave his/her environment. The response may involve one or more staff members. Services shall be provided in accordance with applicable Kentucky Statute and Regulations.

Mobile Crisis provides the same services as crisis intervention, except the location for the service is not in the office. Services are available 24 hours a day, 7 days a week, 365 days a year. This service is provided in duration of less than 24 hours and is not an overnight service. This service provides crisis response in home or community to provide an immediate evaluation, triage and access to acute behavioral health services including treatment and supports to effect symptom reduction, harm reduction or to safely transition persons in acute crises to appropriate least restrictive level of care.

Special Note:

Requires completion of field "Place of Service" SV105 (FAO-07) which cannot be "in office".

Place of Service: The location where the service occurred, not to be confused with the Provider/Site which is the CMHC "primary work site" of the professional providing the service.

SV105 (FAO-07). Place of Service

Data field name - Place_of_Svc

Description: The code that identifies where the service was performed.

Required?: Yes

Error Action: If invalid or null, field set to 98 in database and general error reported.

Valid Codes:

- 02 Telehealth
- 03 School
- 04 Homeless Shelter
- 09 Prison/Correctional Facility
- 10 Community
- 11 Office
- 12 Home
- 13 Assisted Living Facility (e.g., a personal care home)
- 14 Group Home (ID)
- 15 Mobile Unit (e.g., Mobile Crisis)
- 16 Temporary Lodging (e.g. hotel, motel, campground)
- 21 Inpatient Hospital
- 22 Outpatient Hospital
- 23 Emergency Room - Hospital
- 24 Ambulatory Surgical Center
- 25 Birthing Center
- 26 Military Treatment Facility
- 31 Skilled Nursing Facility
- 32 Nursing Facility
- 33 Custodial Care Facility
- 34 Hospice
- 41 Ambulance - Land
- 42 Ambulance - Air or Water

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- 50 Federally Qualified Health Center
- 51 Inpatient Psychiatric Facility
- 52 Psychiatric Facility Partial Hospitalization
- 53 Community Mental Health Center
- 54 Intermediate Care Facility/Individuals with Intellectual Disability
- 55 Residential Substance Abuse Treatment Facility
- 56 Psychiatric Residential Treatment Center
- 57 Non-Residential Substance Abuse Treatment Facility
- 60 Mass Immunization Center
- 61 Comprehensive Inpatient Rehabilitation Facility
- 62 Comprehensive Outpatient Rehabilitation Facility
- 65 End Stage Renal Disease Treatment Facility
- 71 State or Local Public Health Clinic
- 72 Rural Health Clinic
- 81 Independent Laboratory
- 98 Unknown / Not Collected (this should rarely be used)
- 99 Other Unlisted Facility Place of Service not identified above

Service Code 191: Crisis Prevention (Intellectual Disabilities)

Unit of Service: 15 Minutes

Definition: Individuals in crisis are defined as being at risk of losing the support they need to remain in the community. This support may include but is not limited to the following:

- Person-Centered Planning
- Functional Assessment
- Mobile Crisis
- Resource Linkage
- Development of Behavior Intervention Strategies (Behavior Support Plan)
- Transportation
- Debriefing
- Crisis Respite
- Environmental Assessment
- Prevention Services
- Medical Care/Evaluations

Services shall be provided in accordance with applicable Kentucky Statute and Regulations.

Special Notes:

Crisis consumers may also be referred for non-crisis SGF services as needed. Non-crisis services should be provided in accordance with contract requirements and service code definitions.

Individuals with I/DD should also be provided access to all appropriate behavioral health/substance use services and interventions in addition to I/DD specific services.

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Service Code 200, 210, 211: Crisis Intervention (Behavioral Health/Intellectual Disabilities)

200 (15 minutes) - H2011

210 (first 60 minutes) - 90839

211 (each additional 30 minutes) - 90840

Unit of Service: 15 Minutes, 30 minutes, 60 minutes

Service Codes: H2011, 90839, 90840, or other valid procedure code

Definition: Crisis Intervention shall be a therapeutic intervention provided for the purpose of immediately reducing or eliminating risk of physical or emotional harm to the client, or others. This service shall be provided as an immediate relief to the presenting problem or threat. It must be followed by non-crisis service referral as appropriate. It must be provided in a face-to-face, one-on-one encounter between the provider and the client. Services shall be provided in accordance with applicable Kentucky Statute and Regulations. Crisis intervention may include further service prevention planning such as lethal means reduction for suicide risk and substance use relapse prevention.

Objectives

The following objectives should be used to determine what information needs to be collected to adequately report on the array of emergency services that are provided in the region.

Form 101 - Jail Triage PBFR (Bluegrass only)

1. Personnel
2. Travel
3. Training
4. Equipment
5. Subcontract

Form 102 – Jail Triage Project Report Form (Bluegrass only)

1. Total number of triage calls.
2. Total number of triage calls by risk level assignment.
3. Total number of calls by clinical category.
4. Total number of calls by criminal charge.
5. Total number of jail beds participating by county.

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Form 113D – Emergency Services Planning & Implementation Report

1. Adult Diversion from The Justice System - Court Ordered Evaluations (KRS 202A & KRS 202B) and Uniform Citations from Law Enforcement
2. Consultation and Education to Jail Staff
3. Children's Diversion from The Justice System Program *
4. Consultation and Education to Juvenile Detention/Juvenile Justice Center Staff
5. Crisis Intervention Teams (CIT)
6. Telephonic Crisis Services
7. Emergency Psychiatric Services (Centerstone Kentucky only)

*** Children's Diversion from the Justice System Program**

The Children's Diversion from the Justice System Program includes children receiving services at the CMHC due to a KRS 645 court order, children in crisis referred by the Court Designated Worker, children in crisis referred by the FAIR Team, children brought in for a crisis evaluation by law enforcement, or any child who is experiencing a behavioral health crisis and may have further contact and involvement with the justice system unless he or she receives the needed mental health and/or substance use disorder services. This should include all children with any of the above-mentioned justice system involvement that CMHC staff evaluate for services/level of care.

Form 132 – Emergency Services Application

- Section 1: Emergency Services Contacts
Section 2: Regional Emergency Services Arrays
Section 3: System of Care Scope